Approved For Release 2008/12/11 : CIA-RDP67B00074R000500020001-0 (When Filled In) | VOUCHER NO. - DATE 2-12

TO :	Accounts Monetary		(Room (Room		ldg. ldg.)						15	ON YOUCH	ER NO.	13	368)
	Request pay		``			record	ed	as indic	ated	below.	Pertinent		I				
SUBJECT											INVOICE	NO(S).	7+0	F	 		-
PAYMENT TO	Long the	n Com	Jany -	And	rmez		و	pera	tun	·	CONTRA	CT NO. β	H-1;	934	T.O. =	344	7
AMOUNT	129	489.95	<u> </u>				f	<i>,</i> ,			CHECK	TO BE DATE	D				
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	HED CHECKS AND AUTHORIZE MY SIGNATURE OF	AGENT, WHOS			BELOW	, TO RE	CEI				OF OFFICE	AL FUNDS					_
DESCRIPTION -	ALL OTHER ACC		34 - 39 STATION	40 - 41	42 - 47 OBLIG. EF. NO.	1	50 CA OR	l		55 - 6 ALLOT CO	i6 ST - FAN	67 - 70 OBJECT	1		- 80 OUNT		-
	PTION - COUNTS 13 - 27	28 - 33 T/A NO. SHIP. DOC. N		PO A	EF. NO. DVANCE CCT. NO. MP. NO.	PAY PER. LIQ. CODE	C O S T	GENERAL LEDGER ACCT. NO.	FUN	ACCOUNT S	61 - 66 CK. NO.	CLASS 68 - 70 DUE DATE	DE		1	REDIT	T
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9-15-61	PREPARED	BY	DATE	<u> </u>	REVIE	WED BY		1	<u> </u>	DATE		ERTIFIED F					-
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Approved For Release 2008/12/11 : CIA-RDP67B00074R000500020001-0

		BUREAU, OR ESTA	BLISHMEIN AND LOCA	IION	וואס	VOUCHER PREPARED			'	OUCHER NUMB	LN
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	UMBER	DATE OF	/E J	ARTICLES OR	SERVICES	uct or Federal	QUAN-	UNIT P	RICE	A/	MOUNT
	D DATE ORDER	DELIVERY OR SERVICE	supply schedu	ription, item numble, and other info	ormation dec	med necessary)	TITY	COST	PER		
				Invoice	Numbe	<u>rs</u>					
			7 (Orig.	Inv. At	t.) T	ask 3				\$12,5	91.40
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		heet(s) if necessary				se the space be	elow)	To	OTAL	\$29,4	89.95
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S. DEPAKIMENI	, BUREAU, O	RESTABLISHA	MENT AND LOCATIO	N	DA	TE VOUCHER P				Ţ	VOUCHER N	
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NAME AND			la, Va.	• ,	- - -						DATE INVOICE	CE RECEIVED
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								1			DISCOUNT T	ERMS
•	···				٧		_	_		-	PAYEE'S ACC	COUNT NUMBER
											120	
IIPPED FROM			<u></u>	то				WEIG	НТ		GOVERNMEN	NT B/L NUMBER
												
NUMBER AND DATE	DATE DELIVE	RY	(Enter descripti	ARTICLES OR S	r of cont	ract or Federa	d	QUAN-		PRICE		AMOUNT
OF ORDER	OR SER	/ICE	supply schedule,	and other infor	mation de	emed necessar	7)	,,,,,	COST	PER		
			Cost & f	ee incu	rred	as						
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e continuation s				Payee must			ace be	low)		TOTAL		
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FINAL	61 -										 	
	TITLE							Amount	verified; co	orrect for	,	
PROGRESS									or initials,			
	ority vested	in me, I ce	rtify that this vou	cher is correct o	nd prope	r for paymen	t.					
PROGRESS ADVANCE				a ===						750		
PROGRESS ADVANCE		ACCOUN	(Authorized)	Certifying Officer		Symbol must	he cha	un. other -1	assification	(Title)	n	
PROGRESS ADVANCE		~~~~~		Chargeable	Bure	au Cont. or	Bur	eau	Sub-	Ident	ifi-	A == === +
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☆ GPO: 1963: 68530

Sheet No. 2 of Bureau Voucher No. 7

Standard Form No. 1035 " 7 GAG 5030 1035-105

U.S. Government

RE IMBURSEMENT

BILLED ON VOUCHER NOS. 16

NET AMOUNT OF THIS CLAIM

Pul c Voucher for Purchases an Services Other Than Personal

CONTINUATION SHEET

(Department, bureau, or establishment)

No. and Date of	ARTICLES OR SERVICE	ES	OUAN-	UNIT	PRICE	AMOUNT	
of Order Delivery or Service	(Enter description, item number of contra schedule, and other information dee		QUAN- TITY	Cost	Per		
		Current		С	umul a	tive	
		Charges			harge		
		6-29-64	to		o Dat		
		12-31-6	4	_			
Direct Materia	1	A 110	70	^	51	7 50	
Direct Labor	*	\$ 118 8,562		Ş	21 / 31	7.52	
Outside Comput	er Service	9,836			21,45 10,59	4.40 4.26	
Cravel and Liv		134				6.15	
Rent of Esuipm			.00			5.00	
Other			.00			2.00	
Engineering Ov	erhead (A)	9,687			27,24		
General Admin.		3,253				3.18	
TOTAL COST	- "	\$31,597		\$	67,22		
Fixed Fee		944	.00	***	3,75	8.00	
TOTAL CLAIMS S	UBMITTED	32,541	.97		70,97	9.46	
Contract Reser	ves Withheld:						
Excess of 85%		141	.60		56	3.70	
	of contract Value	\$19,808		ន្	20,25		
TOTAL CHARGES	SUBJECT TO						

\$12,591.40

United States Government

Sheet No. 3 of Bureau Voucher No. 7

	<u>Period</u>	Labor	<u>өн</u>
(A)	6-29-64 thru 12-31-64	\$8,562.96	\$10,018.66
	Adj. of 1-1-64 thru 6-28-64 from 120% to 117%		(314.61)
	Adj. of 1963 OH from 207% to 206.3%		(16.83)
	Total	\$8,562.96 G & A	\$ 9,687.22
(B)	6-29-64 thru 12-31-64	\$3,289.91	
	Adj. of 1963 rate from 10.2% to 9.732%	(36.39)	
	Total	\$3,253.52	

Sta	ndard Form 7 GAO 50 1034-110-	000		PUBL. SEI	VOUCH RVICES O					ID			
U.\$.	DEPARTMENT,	BUREAU, OR	ESTABLISHME	NT AND LOCATION	1		OUCHER PR		196	 5	Ī	OUCHER	NUMBER B
	XXX	KIMINI	CENT	XXXXX			RACT NUMBE	·		·	1	AID BY	
	U. S.	GOVERNM	ENT				1934, sition num			& 4			
	AYEE'S NAME			Co. /Aut Ler Ave.		i			٦			ATE INV	DICE RECEIVED
	AND DDRESS			a, Va.	•				ı			ISCOUNT	
	L	_						-			P		CCOUNT NUMBER
SHIP	PED FROM		<u> </u>		то				WEIG	ЭНТ	d	OVERNM	ENT B/L NUMBER
	NUMBER	DATE O			RTICLES OR SI		t on Eadan-	,	QUAN-	UNIT	PRICE	I	AMQUNT
1A 10	ND DATE F ORDER	OR SERVI	ČE .	(Enter description supply schedule, a	on, wem number and other inform	oj contract action deem	ed necessar	,)	TITY	COST	PER		(')
				ost & Fe ttached	Form 10	35							16,89 8. 55
(Use	continuation s			(Payee must			ace be	low)		TOTAL	\$	16,898.55
PAY	MENT: COMPLETE	APPROVED	FOR	=\$	EX	CHANGE F		\$1.00	DI	FFERENCES	-	 	
	PARTIAL	BY 2						•				1	
	PROGRESS	TITLE				······································				verified; co			
Pur	ADVANCE suant to auth	ority vested	in me, I cer	tify that this vouc	cher is correct a	nd proper f	for paymen	t.	(Signasur	e or initials	<u>, </u>		
_	(Date)				Certifying Officer						(Title)		
	Appropriatio	n Symbol	Object	Expenditure	Chargeable	Bureau	Cont. or		eau	Sub- uth'n No.	optional Identi cation	fi-	Amount
	and Sub	nead	Class	Account	Activity	Subauth'	n Activity	Contr	01 140. 8	uin n No.	cation	110.	
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i. R	. No's	MREP	₩	TREASURER OF T	HE UNITED STAT	TES 1	CHECK NU	MRFP		ON (Nan	e of hank)	
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PAID	CASH		DATI	E			PAYEE 3						
12 1f 1	the shility to	certify and at	ithority to a	ame of currency.	ned in one perso	n, one sign	ature only i	s necessa	ry; other-	PER			
wis	he the approvi	ing officer will r is receipted ne as well as	I sign in the in the name the capacin	space provided, or e of a company or y in which he sign is the case may be	corporation, the	itle. name of th	e person w	iting the	company	TITLE			

Purice Voucher for Purchases at Services Other Than Personal

CONTINUATION SHEET

1	D-4	ADTICI PO OR CONTIONS			UNIT	PRICE	AMOUNT		
o. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal schedule, and other information deemed necessar	supply y)	QUAN- TITY	Cost	Per	AMOUNI		
_		FINAL BILLING							
			,		 		Cumulative		
				urren			Charges		
				to 12/			to Date		
			•		02/01	•	20 200		
		Direct Labor	\$	(11.	37)		\$21,443.09		
		Engineering Overhead							
		at Billing Rate		(13.	31)		27,235.58		
		Direct Materials			**		517.52		
		Outside Computer Services					10,594.26		
		Rent of Equipment		(37.	00)		5.00 419.06		
		Travel & Living Other		(82,			419.00		
		Total Product Cost	\$	(143.			\$60,214.51		
		G & A at Billing Rate		(16,	84)		6,846.34		
		Total Cost	\$	(160,	61)		\$67,060.85		
		Cost Withheld on	•	(,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		Previous Vouchers	20	253	46		_		
		Less-Cost in excess of							
		Contract Value		3,194.	30				
		Total Cost	\$1	6,898	55		\$67,060.85		
		Total Claim Submitted	\$1	6,898	,55		\$67,060.85		
		Total Charges Subject							
		to Reimbursement	\$1	6,898	,55		\$67,060.85		
		Paid on Vouchers # 1-7					50,162.30		
		NET AMOUNT THIS CLAIM					\$16,898.55		
							1		
							1		
			i		1		1		